JEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



January 23, 1989

ALL-COUNTY LETTER NO. 89-09

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: REVISED COUNTY SERVICES BLOCK GRANT PROGRAMS, MONTHLY STATISTICAL REPORT, FORM SOC 242 (1/89)

Effective February 1, 1989, all County Welfare Departments are required to implement the enclosed reporting instructions and revised Form SOC 242 (1/89) for the County Services Block Grant (CSBG) Programs. The SOC 242 was revised to provide additional information on caseload movement activities for all CSBG Programs, with emphasis on Adult Protective Services (APS). The SOC 242, formerly the Title XX Social Services Quarterly Statistical Report, is now a monthly report.

Background

The revised SOC 242 is the result of the efforts of the County Welfare Directors Association's (CWDA) APS Statistical Committee which includes representatives from the counties and the State Department of Social Services (SDSS). The Committee's purpose for revising the form was to develop a method for collecting accurate and consistent data upon which program and fiscal policies could be based.

Coincidentally, the Committee was established after the introduction of Senate Bill 2545 (Rosenthal) and SDSS's proposed Emergency Response (ER) program for adults. Senate Bill 2545 was to be 100 percent state-funded and ER data needed to be separately identified. Even though the bill did not pass, the revised SOC 242 contains ER-related data elements because it is still the Department's intent to seek legislation to provide an ER program and the data will be needed in such an event. The CWDA Board of Directors agreed with the Committee's recommendation to proceed with this data collection and approved the form and instructions in September 1988. Additionally, the data will provide a "before" picture which can be used to make future comparisons after a statewide ER program becomes operational.

To ensure accurate and consistent data on a statewide level, members of the APS Statistical Committee provided training on the final draft of the revised form and instructions during the counties' regional meetings in October and during the annual Adult Services Training Conference at Asilomar in November. All counties were informed during the training that the definitions for ER and non-ER APS cases specified in the instructions were provided to facilitate uniform statistical reporting. They are not intended to define what any eventual ER Program will be. Comments received from these training sessions were used to develop the final set of form and instructions.

For those counties unable to attend the training sessions, the Committee has produced a video tape of the training workshop. Information regarding its availability may be obtained through the regional chairperson of the Adult Services Committee. Please contact your regional chairperson if you wish to use the video tape.

Implementation

Counties are to implement the revised SOC 242 for the February 1989 report month. This report is due in Sacramento no later than March 31, 1989. The last report due on the former SOC 242 is for the quarter ending December 31, 1988. No report is required for the January 1989 report month.

Due to the changes in reporting format, Statistical Services Section will not reject any February 1989 report in which the number of cases brought forward from the prior month for Out-of-Home Care Adults, Emergency Response, and Non-Emergency Response (Line Item Nos. 2, 8, and 13) is not identical with the number of cases stated for these programs in the December 1988 quarterly report. However, the number of cases reported in these line items on the February report must represent the actual inventory of cases on hand at the beginning of the month for these programs.

If you have any questions regarding the revised SOC 242 or reporting instructions, please contact Ms. Susan Derrick, Statistical Services, at (916) 322-5462.

DENNIS J. BOYLE Deputy Director

cc: CWDA

Enclosure

COUNTY SERVICES BLOCK GRANT PROGRAMS MONTHLY STATISTICAL REPORT

SEND ONE COPY TO:
Department of Social Services
Statistical Services
744 P Street, MS 19-81
Sacramento, CA 95814

| | | COUNTY | | | CODE | | | |
|--|--|----------|---|------|---------|---------------------------------------|--|--|
| | | P | MONTH ENDING | | MONTH / | YEAR / | | |
| PART A: INFORMATION AND REFERRAL | | | | | Respo | nses | | |
| 1. | Number of responses to requests for Information and Referral | 1 | | | | | | |
| PART | B: OUT-OF-HOME CARE ADULTS (OHC-A) | | | | Cas | 2 s | | |
| 2. | Cases brought forward from last month (same as Item 6 on prior month report). | 2 | | | | | | |
| 3. | Cases opened during the month | | | 3 | | | | |
| 4. | Total number of active cases during month (sum of Items 2 and 3) | 4 | | | | | | |
| 5. | Cases closed during the month | 5 | | | | | | |
| 6. | Cases carried forward to next month (Item 4 minus Item 5) | | *************************************** | 6 | | | | |
| PART | D: ADULT PROTECTIVE SERVICES (APS) | | Contacts | | | | | |
| Selection of the section of | Processing Services (Problem Control of the Control | 7 | | | | | | |
| | Number of APS reports/referrals/requests received during the monthergency Response (ER) Cases | | Cas | | | | | |
| 8. | Cases brought forward from last month (same as Item 12 on prior month report) | 1 | | 8 | 040 | | | |
| | | | | | | | | |
| 9. | | | | | | WYSTONIA AMERICAN WORKERS TANAMOSTIC. | | |
| 10. | Total number of active cases during month (sum of Items 8 and 9) | | | | | | | |
| 11. | Cases closed during the month (sum of Items 11a and 11b) | | | 11 | | 73.63.7 (11 × 1460 - 7 7 477) | | |
| | a. Closed, no further activity | 11 | а | | | | | |
| | b. Transferred to non-ER (same as Item 14b below) | 11 | ь | 0000 | | | | |
| 12. | · · · · · · · · · · · · · · · · · · · | | | 12 | | | | |
| | n-Emergency Response (Non-ER) Cases | 13 | | | | | | |
| | Cases brought forward from last month (same as Item 17 on prior month report | | | | | | | |
| 14. | Cases opened during the month (sum of Items 14a and 14b) | <u> </u> | | 14 | | | | |
| | a. From Intake | 14 | fa | _ | | | | |
| | b. From Emergency Response (same as Item 11b above) | 14 | 1b | _ | | | | |
| 15. | Total number of active cases during month (sum of Items 13 and 14) | | | | | | | |
| 16. | Cases closed during the month | | | | | | | |
| 17. | Cases carried forward to next month (Item 15 minus Item 16) | 17 | | | | | | |
| Case Activities | | | | | | ties | | |
| 18. | Total number of reassessments | 18 | | | | | | |
| 19. | Total number of Emergency Responses | 19 | | | | | | |
| PART | D: OPTIONAL SERVICES | | Casi | es | | | | |
| 20. Number of cases receiving optional services during the month | | | | | | 20 | | |
| PERSON | TO CONTACT | TELEPH | ONE NUMBER | DAT | ſΕ | | | |
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COUNTY SERVICES BLOCK GRANT PROGRAMS MONTHLY STATISTICAL REPORT FORM SOC 242 (revised 1/89)

CONTENT

The County Services Block Grant (CSBG) Programs Monthly Statistical Report, Form SOC 242 (1/89), records information from County Welfare Departments (CWDs) in the following areas: Information and Referral (I and R), Out-of-Home Care Adults (OHC-A), Adult Protective Services (APS) which consists of Emergency Response (ER) and Non-Emergency Response (Non-ER) services, and Optional Services.

PURPOSE

The general purpose of this report is to collect information on the current status and trends in the CSBG Programs to provide a factual basis to County, State, and Federal administrators for budgeting, program planning, and other administrative decisions concerning social services in California. The specific purpose of this report is to collect caseload information and level of activities in each of the CSBG Programs.

DISTRIBUTION

The information is distributed monthly within the Department of Social Services for program administration. Summaries of this information will be made available to CWDs and other interested agencies and individuals upon request.

IMPLEMENTATION DATE

The implementation date for the revised form SOC 242 (1/89) is February 1, 1989. The February 1989 report will be the first report due on the revised form.

DUE DATE

The SOC 242 is due in Sacramento on or before the last working day of the month following the end of the report month. For example, the February 1989 report is due no later than March 31, 1989. If the report will be either delayed or incomplete in any way, please contact Statistical Services by telephone at (916) 322-2230.

Send one copy of the report to:

Department of Social Services Statistical Services 744 P Street, M.S. 19-81 Sacramento, CA 95814 INSTRUCTIONS FOR COMPLETING FORM SOC 242 (1/89)

PART A: INFORMATION AND REFERRAL

Item 1. Number of responses to requests for Information and Referral.

Report the number of times Information and Referral (I and R) was provided by the CWD during the month. I and R refers to the provision of information on human services resources (adult, family, and children) and a brief assessment of the request, but not diagnosis and evaluation, solely for the purpose of facilitating an appropriate referral to available public and private resources which provide such services. See MPP Section 30-050.

PART B: OUT-OF-HOME CARE ADULTS (OHC-A)

When the CWD receives an application for adult out-of-home care services, it is considered a case. A case must have distinguishable and retrievable "case status" within the CWD's central index/registry (i.e., case folder and number), and a case record or case file as required by regulation. See MPP Section 30-600.

NOTE: Requests for certification of out-of-home care by Social Security Administration are to be reported on the Form ABD 216, not on the SOC 242.

Item 2. Cases brought forward from last month (same as Item 6 on prior month report).

Report the number of cases receiving OHC-A services on the first day of the report month. This must be the same number as stated in Item 6 (cases carried forward to next month) on the prior month report.

Item 3. Cases opened during the month.

Report the number of OHC-A cases opened during the month.

Item 4. Total number of active cases during month (sum of Items 2 and 3).

Enter the sum of Items 2 and 3 above.

Item 5. Cases closed during the month.

Report the number of OHC-A cases closed during the month.

Item 6. Cases carried forward to next month (Item 4 minus Item 5).

Enter the remainder of Item 4 minus Item 5.

- PART C: ADULT PROTECTIVE SERVICES (APS)
- Item 7. Number of APS reports/referrals/requests received during the month.

Enter the number of APS reports/referrals/requests received during the month, including new reports on existing APS cases. Reports include all reports of abuse to the APS population as defined by regulations. (See MPP Section 30-800.) If a report comes in as an I and R, the CWD would count this in both Items 1 and 7 on this form. Referrals/requests include all referrals/requests made to the CWD specifically for services to prevent or remedy danger to adults.

Please note that this line item represents a duplicative person count. Two reports made to the CWD by two different individuals on the same incident would be counted as two reports received.

Emergency Response (ER) Cases

NOTE: This definition of an APS Emergency Response (ER) case is provided to facilitate uniform statistical reporting. It is not intended to define what any eventual ER Program will be.

A report of abuse, referral, or request for APS is reported as an Emergency Response case when all the following conditions are met:

- (1.) At the point of intake, CWD staff has determined that the initial evaluation of available information indicates that the situation is of a serious nature which warrants/mandates that an IMMEDIATE investigation to establish the facts be initiated;
- (2.) The person is a dependent adult/elder. A dependent adult/elder is defined as any person 18 years of age or older who has physical or mental limitations which restrict his/her ability to carry out normal activities, to protect his/her own resources; including persons who are functionally impaired due to physical, mental, or developmental disabilities or

whose physical or mental abilities have diminished because of age;

- (3.) The person is a victim of physical abuse or is in circumstances or conditions likely to produce great bodily harm or death; and
- (4.) The CWD staff responds within five calendar days.
- Item 8. Cases brought forward from last month (same as Item 12 on prior month report).

Report the number of ER cases receiving services on the first day of the report month. This must be the same number as stated in Item 12 (cases carried forward to next month) on the prior month report.

Item 9. Cases opened during the month.

Report the number of ER cases opened during the month.

Do not report the number of emergency responses provided on non-ER cases in this line item. An emergency response on an open non-ER case cannot be counted as a new ER case. This emergency response is to be reported in Case Activities, Item 19 of this form.

Item 10. Total number of active cases during month (sum of Items 8 and 9).

Enter the sum of Item 8 plus Item 9.

Item 11. Cases closed during the month (sum of Items 11a and 11b.

Report the total number of ER cases closed during the month.

Item 11a. Closed, no further activity.

Of the total number of closed ER cases reported in Item 11 above, enter the number of cases for which there were no further APS activities.

Item 11b. Transferred to Non-Emergency Response (same as Item 14b below)

Of the total number of closed ER cases reported in Item 11 above, enter the number of cases that were transferred to non-Emergency Response.

An ER case is reclassified as a non-ER case when the CWD staff has determined that:

- The emergency situation no longer exists when the emergency services have been provided;
- Based on a follow-up assessment, the client is no longer in jeopardy, his/her situation has been stabilized, and no further emergency protective services are required; and
- There is a need for non-ER services.

Item 12. Cases carried forward to next month (Item 10 minus Item 11)

Enter the remainder of Item 10 minus Item 11.

Non-Emergency Response (Non-ER) Cases

NOTE: This definition of an APS non-Emergency Response (non-ER) case is provided to facilitate uniform statistical reporting. It is not intended to define what any eventual ER Program will be.

A report of abuse, referral, or request for APS is reported as a non-Emergency Response case when all the following conditions are met:

- (1.) At the point of intake, CWD staff has determined that the initial evaluation of available information indicates that the situation is not of a serious nature which warrants/mandates that an immediate investigation to establish the facts be initiated;
- The person is a dependent adult/elder. A dependent adult/elder is defined as any person 18 years of age or older who has physical or mental limitations which restrict his/her ability to carry out normal activities, to protect his/her own resources; including persons who are functionally impaired due to physical, mental, or developmental disabilities or whose physical or mental abilities have diminished because of age; and
- (3.) The person is <u>not</u> in circumstances or conditions likely to produce great bodily harm or death.

Item 13. Cases brought forward from last month (same as Item 17 on prior month report).

Report the number of non-ER cases receiving services on the first day of the report month. This must be the same number as stated in Item 17 (cases carried forward to next month) on the prior month report.

Item 14. Cases opened during the month (sum of Items 14a and 14b).

Report the total number of non-ER cases opened during the month.

Item 14a. From Intake

Of the total number of non-ER cases reported in Item 14 above, enter the number of cases opened from Intake. These cases should be a direct result of a report/referral/request received by the CWD and not transferred from ER.

Item 14b. From Emergency Response (Same as Item 11b above)

Of the total number of cases reported in Item 14 above, enter the number of cases that were reclassified as non-ER from ER status.

Item 15. Total number of active cases during month (sum of Items 13 and 14.

Enter the sum of Item 13 plus Item 14.

Item 16. Cases closed during the month.

Enter the number of non-ER cases closed during the month.

Item 17. Cases carried forward to next month (Item 15 minus Item 16).

Enter the remainder of Item 15 minus Item 16.

Case Activities

Items 18 and 19 represent the number of times a reassessment and emergency response were provided by the CWD staff during the month. Report one count for each time a reassessment or emergency response is provided. The activities of reassessment and providing emergency response could occur at the same time. In this situation, one count would be made in Item 18 and one count in Item 19. This is an activity count and not a case count.

Item 18. Total number of Reassessments.

Enter the total number of reassessments performed by CWD staff during the month. A reassessment is the activity which reviews all past assessments and examines the current condition of the client and his/her family that results in written documentation in the case record or case file. The activity must be documented in the case record/case file for a reassessment to occur. The reassessment is used to evaluate the effectiveness of the current service plan and to review the progress that has been made towards achieving the objectives identified in the service plan. See MPP Section 30-002(w).

Item 19. Total number of Emergency Responses.

Enter the total number of emergency responses made by CWD staff during the month. An emergency response is to be reported each time the Social Worker is required to respond to circumstances defined as an ER case on page 3 of these form instructions.

PART D: OPTIONAL SERVICES

Optional Services are social services programs which are not mandated by Federal or State law.

Examples of Optional Services Programs include:
Special Care for Children in Their Own Homes; Home
Management and Other Functional Educational Services;
Employment/Education Training; Services for Children
with Special Problems; Services to Alleviate or
Prevent Family Problems; Sustenance; Housing Referral
Services; Legal Referral Services; Diagnostic
Treatment Services for Children; Special Services for
the Blind; Special Services for Adults; Services for
Disabled Individuals; and Services to County Jail
Inmates.

Item 20. Number of cases receiving optional services during the month.

Enter the total number of active cases receiving optional services during the month. An application for optional services becomes a case when received by the CWD. A case must have distinguishable and retrievable "case status" within the county's central index/registry (i.e., case folder and number), and a case record as required by regulation. If an

individual meets the definition of a case in more than one optional service program, the individual should be counted for all programs in which he/she is participating. For example, a person receiving services from two programs shall represent a count of two cases in Item 20.